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FOUNDATION SOURCE

October 10, 2024

CERTIFIED MAIL NO. 7021 2720 0001 9139 1829

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: THE CHRISTOPHER M. BARNETT FAMILY FOUNDATION

Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in

Florida

Dear Sir or Madam:

Enclosed on behalf of The Christopher M. Barnett Family Foundation, a private foundation, are the following:

- 1. An Application by Foreign Not for Profit Corporation for Authorization to Conduct Its Affairs in Florida;
- 2. A Certificate of Good Standing issued by the State of Delaware on which it states that The Christopher M. Barnett Family Foundation is an exempt corporation;
- 3. The filing fee of \$70.00.

If all is in order, please issue a Certificate of Qualification for The Christopher M. Barnett Family Foundation.

If you have any questions or require additional information, you may contact me at the above telephone number.

Very truly yours,

Judith Hirschkorn
Director
Foundation Source
Administrator, The Christopher M. Barnett Family Foundation
Enclosures



COVER LETTER

-	istration Section ision of Corporations					
SUD IECT	THE CHRISTOPHER M. BARNETT FA	MILY FOUNDATION				
SUBJECT	Name of Corporation	on – must include suffix				
Dear Sir or N	Madam:					
Affairs in Flo	I "Application by Foreign Not for Profit orida", "Certificate of Existence", or "C bove referenced not for profit corporati	ertificate of Status" and ch	eck are submitted to			
Please return	all correspondence concerning this ma	tter to the following:				
	Judith Hirsekhkorn					
	Name o	f Person				
	Foundation Source					
	Firm/C	ompany				
	209 Glencove Rd. Ste A PMB 613					
	Ado	lress				
	Carle Place, NY 11514					
	City/State a	nd Zip Code				
	statefilings@foundationsource.com					
	E-mail address: (to be used for f	uture annual report notific	ation)			
For further in	nformation concerning this matter, pleas	se call:				
Judith Hirsel	nkom	516 870-7746				
	Name of Person	516 870-7746 Area Code Daytime Te	lephone Number			
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
Enclosed is a Please make o	a check for the following amount: theck payable to: FLORIDA DEPARTME ling Fee \$\Bigcup \text{\$78.75 Filing Fee &} Certificate of Status	NT OF STATE \$\Bigs\\$78.75 Filing Fee & Certified Copy	□\$87.50 Filing Fee, Certificate of Status & Certified Copy			

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

	TOPHER M. BARNETT FAMIL			
(Name of corpo import in langua in the name at p	ration: must include the word "IN age as will clearly indicate that it i resent. "Company" or "Co." may i	CORPORATED" or ' s a corporation instea not be used as a corpo	CORPORATION" or words or abbrevial of a natural person or partnership if no rate suffix by a nonprofit corporation.)	tions of like t so contain e d
THE CHRISTO	OPHER M. BARNETT FAMILY	FOUNDATION INC		
(If name unava	ailable in Florida, enter alternate c	orporate name adopte	d for the purpose of transacting business	in Florida)
DELAWARE		3 99-223	3874	
(State or cour	ntry under the law of which it is in	icorporated)	(FEI number, if applicable)	
3/27/2024		5.	(Date of duration, if other than perpe	
(1	Date of Incorporation)		(Date of duration, if other than perpe	tual)
(Date first cond	ucted affairs in Florida if prior to re-	gistration. See sections	617.1501 & 617.1502, F.S. to determine	penalty liability.)
301 SILVERS	IDE RD., STE. 123, WILMINGTO	Principal office stree		
	,	i micipal office stree	Laudicss)	
	(Cu	rrent mailing address.	if different)	
CHARITABL	E GRANTMAKING			
(Purpose(s) of	corporation authorized in home sta	ate or country to be ca	rried out in the state of Florida)	~~~~
				υŻι
Name and str	eet address of Florida registere	d agent: (P.O. Box)	NOT acceptable)	00.
	Chairtenhan M. Damatt			2uż4 OC+ 16
Name:	Christopher M Barnett			91
ffice Address:	110 E Broward Blvd., 11th Floor	·		ر <i>د</i> ۔
	Fort Lauderdale	Fio	rida 33301 (Zip Code)	T:
	(City)	, 1 10	(Zip Code)	₹2
				- 2
0. Registered	agent's acceptance:			
aving been na esignated in th	imed as registered agent and to is application. I hazaby accept	o accept service of p	process for the above stated corporates a registered agent and agree to act is	tion at the place n this canacity
rther agree to	comply with the provisions of	^r all statutes relative	to the proper and complete perform	nance of my du
nd I am famili	ar with and accept the obligati	ions of my position	as registered agent.	
	1// 1			
	(31.4)	111		
		10/		
	$U^{\circ \circ}$	(Registered agent's	ignature)	

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTOR			
□ Chairman	Name: Christopher M Barnett	□ Chairman	Madison Mulvey Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
■ Director	501 Silverside Rd., Ste 123	⊟Director	501 Silverside Rd., Ste 123
President	Wilmington, DE 19809	□President	Wilmington, DE 19809
□Vice President		□ Vice President	
Secretary	□Treasurer	■ Secretary	□Treasurer
☐Other:	Other:	Other:	Other:
□ Chairman	Name: Kennedy Mulvey	□Chairman	Julie Barnett
□Vice Chairman	c/o Foundation Source	□Vice Chairman	Address:c/o Foundation Source
■Director	501 Silverside Rd., Ste 123	Director	501 Silverside Rd., Ste 123
□President	Wilmington, DE 19809	□President	Wilmington, DE 19809
□Vice President		□Vice President	
□Secretary	■Treasurer	Secretary	☐Treasurer
□Other:	Other:	□Other:	Other:
□ Chairman	Name:	□Chairman	Name:
□Vice Chairman	c/o Foundation Source		Address:
■Director	501 Silverside Rd., Ste 123	□Director	
□President	Wilmington, DE 19809	— □President	
□Vice President		□Vice President	
☐Secretary	□Treasurer	☐ Secretary	□Treasurer
□Other:	Other:	Other:	Other:
Non-indexed indiv	t Notice Use an attachment to report more the fiduals may be added to the index when filing (Signature of Chairman, Vice Chairman, or	g your Florida Department o	of State Annual Report form.

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "THE CHRISTOPHER M. BARNETT FAMILY

FOUNDATION" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF

DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE

EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE

SEVENTH DAY OF OCTOBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS AN EXEMPT CORPORATION.

Authentication: 204572852

Date: 10-07-24